

**FILING DECLARATION  
AND POWER OF ATTORNEY**

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As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first, and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: METHODS AND COMPOSITIONS FOR INDUCING IMMUNE RESPONSES AND PROTECTIVE IMMUNITY BY PRIMING WITH ALPHAVIRUS RELICON VACCINES, the specification of which was filed on November 13, 2003, receiving Application No. 10/705,088.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim priority benefits under 35 United States Code Section 119 (e) for any provisional application listed below and have also identified below the priority date of filing of the provisional application which is before the filing date of the application for which this priority is claimed.

Prior Provisional Applications 60/425,720	13/11/2002	X	Priority Claimed
Number	Day/Month/Year Filed	Yes	No

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign applications for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Number	Country	Filing Date	Priority (Yes/No)

I hereby claim the benefit under Title 35, United States Code, §120 of any United States applications listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. Appl. Serial No.	U.S. Filing Date	Status (patented/pending/abandoned)

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the registered practitioners in the office of Associate Counsel, Intellectual Property for Naval Medical Research Laboratory, Silver Spring, MD associated with Customer Number 14-0595 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and hereby certify that the Government of the United States has the irrevocable right to prosecute this application. Direct all correspondence to that Customer Number.

<b>SEND CORRESPONDENCE TO:</b>  Counsel, Code 00L Naval Medical Research Center 503 Robert Grant Ave. Silver Spring, MD 20910-7500	<b>DIRECT TELEPHONE CALLS TO:</b>  Attorney Name: Ken Henry Reg. No. 42,652 (301)319-7429
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF JOINT INVENTOR 1: Denise L. Doolan

INVENTOR'S SIGNATURE: *DL Doolan* DATE: 7/20/04

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FILING DECLARATION  
AND POWER OF ATTORNEYNavy Case 84381  
Page 2 of 2FULL NAME OF JOINT INVENTOR 2: **Gary T. Brice**

INVENTOR'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

RESIDENCE:

CITIZENSHIP: USA

POST OFFICE ADDRESS:

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FPO AP 96520-8132

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FULL NAME OF JOINT INVENTOR 3: **Carlota Dobano-Lazaro**

INVENTOR'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

RESIDENCE: Barcelona, Spain

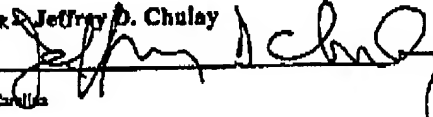
CITIZENSHIP: Spain

POST OFFICE ADDRESS:

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FULL NAME OF JOINT INVENTOR 4: **Jeffrey D. Chulay**INVENTOR'S SIGNATURE:  \_\_\_\_\_DATE: 20 Aug 2004


RESIDENCE: Chapel Hill, North Carolina

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FULL NAME OF JOINT INVENTOR 5: **Kurt I. Kamrud**INVENTOR'S SIGNATURE:  \_\_\_\_\_DATE: 8/20/04

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FULL NAME OF JOINT INVENTOR 6: **Jonathan F. Smith**INVENTOR'S SIGNATURE:  \_\_\_\_\_DATE: 8/20/04

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CITIZENSHIP: USA

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FILING DECLARATION  
AND POWER OF ATTORNEYNavy Case 84,381  
Page 2 of 2

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